	is information to identify the case:		ed 01/16/25 20:	19:14 Desc Main
Debtor1	Richard A. Potts	Document	Page 1 of 3	20121 2000
Debtor 2 Spouse,				
•	states Bankruptcy Court for the : <u>WESTERN</u> Distric	et of Pennsylvania		
	mber 19-23883-GLT	(State)		
Jase III	111001 13-23003-GET			
	4400D			
	<u>4100R</u> 	Cura		
esp	onse to Notice of Final	Cure		10/15
ordin	g to Bankruptcy Rule 3002.1(g), the credi	tor responds to the truste	e's notice of final cure payment.	
art 1:	Mortgage Information			
	of creditor: Lakeview Loan Servicing, LLC digits of any number you use to identify the		Cour	t claim no. (if known): <u>4-1</u>
) rone:	ty address: 4020 NOBLESTOWN R	ח		
TOPE	Number Street	U ,		
	OAKDALE, PA 15071	0		
	City	State ZIP	Code	
ırt 2:	Prepetition Default Payments			
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		id in full amount required to	cure the prepetition default on the	
	ne: Creditor agrees that the debtor(s) have pacreditor's claim	id in full amount required to	cure the prepetition default on the	
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*Secured creditor agrees that all payments have been disbursed by the Trustee pursuant to the plan have been received. Debtor is responsible for the post-plan takeover and is currently due for the 11/1/24 through 1/1/2025 payments.

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Part 4:

Debtor 1

Itemized Payment History

If the creditor disagrees in Part 2 that the prepetition arrearage has been paid in full or states in Part 3 that the debtor(s) are not current with all postpetition payments, including all fees, charges expenses, escrow, and costs, the creditor must attach an itemized payment history disclosing the following amounts from the date of the bankruptcy filing through the date of this response:

Last Name

- [X] all payments received;
- [X] all fees, costs, escrow, and expenses assessed to the mortgage; and
- [X] all amounts the creditor contends remain unpaid

Part 5:

Sign Here

The person completing this response must sign it. The response must be filed as a supplement to the creditor's proof of claim

Check the appropriate box:

[] I am the creditor.

[X] I am the creditor's authorized agent.

I declare under penalty of perjury that the information provided in this response is true and correct to the best of my knowledge, information, and reasonable belief.

Sign and print your name and your title, if any, and state your address and telephone number if different from the notice address listed on the proof of claim to which this response applies.

x /s/ Christopher Salamone

Date 01/16/2025

Title Authorized Agent

Print Christopher Salamone

First Name Middle Name

Last Name

Company Robertson, Anschutz, Schneid, Crane & Partners, PLLC

If different from the notice address listed on the proof of claim to which this response applies:

Address 13010 Morris Rd, Suite 450

Number Stre

Alpharetta, GA 30004

City State ZIP Code

Contact 470-321-7112 Email csalamone@raslg.com

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF PENNSYLVANIA DISTRICT OF PITTSBURGH

IN RE: Richard A. Potts,	CASE NO.: 19-23883-GLT
Debtors.	Chapter 13
/	

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that on January 16, 2025, I electronically filed the foregoing with the Clerk of Court using the CM/ECF system, and a true and correct copy has been served via United States Mail to the following:

Richard A. Potts 4020 Noblestown Road Oakdale, PA 15071

And via electronic mail to:

Kenneth Steidl Steidl & Steinberg Suite 2830 Gulf Tower 707 Grant Street Pittsburgh, PA 15219

Ronda J. Winnecour Suite 3250, USX Tower 600 Grant Street Pittsburgh, PA 15219

Office of the United States Trustee 1000 Liberty Avenue Suite 1316 Pittsburgh, PA 15222

By: /s/ Long-Glang Nguyen Email: petnguyen@raslg.com